

NEIGHBORHOOD SERVICES**Telephone: 301-258-6340****Fax: 301-258-6174**

SPECIAL EVENT PERMIT APPLICATION

*Please type or print all information**Forms must be submitted at least 45 days prior to event start date.**Incomplete forms will not be processed.***OFFICE USE ONLY**

- ☐ Application fully approved
- ☐ Application conditionally approved pending:
 - ☐ Insurance documents
 - ☐ Fees/deposits
- ☐ Application denied, reason:

APPLICANT

Organization(s) _____ Phone _____

Contact person _____ Day phone _____

Email _____ Fax _____

Mailing address _____

Non-profit organization? ☐ No ☐ Yes, ID number _____**EVENT**

Name/Title of event _____

Date requested _____ Day(s): Mon Tue Wed Thu Fri Sat Sun

Location☐ See additional attachments

(Describe specific location, include a drawing/detailed map to include area used, entry and exits (if enclosed), parking, structure locations, bleachers, canopies, fences, displays, concessions, etc.)

Description of event (in detail) _____

☐ See additional attachments

Set up to start at (day and time) _____ Event start time _____

Cleanup completed (date and time) _____ Event end time _____

Estimated daily attendance _____ Estimated total attendance _____

Admission fee/registration charged ☐ No ☐ Yes, amount _____

Person in charge (day of event) _____

Home/office phone _____ Cell phone _____

Private security/traffic control ☐ No ☐ Yes

Security company _____ Telephone _____

PROPOSED EVENT ELEMENTS

Please indicate whether the event will include any of the following elements.

Yes/No

- ☐ ☐ Alcohol
- ☐ ☐ Amplified music/sound
- ☐ ☐ Barbecue/open flame
- ☐ ☐ Carnival (attach detail description)
- ☐ ☐ Casino games/bingo/drawing/lottery
- ☐ ☐ Circus (attach detailed description)
- ☐ ☐ Electrical generators
- ☐ ☐ Fireworks/pyrotechnics/lasers/rockets, etc.
- ☐ ☐ Food/beverage preparation/service/vendors
- ☐ ☐ Inflatable (jumps, etc.)
- ☐ ☐ Live animals
- ☐ ☐ Live performance/concert (attach details)
- ☐ ☐ Parade on City streets/in public right-of-way

Yes/No

- ☐ ☐ Portable restrooms
- ☐ ☐ Signs posting /promotional banners, etc.
- ☐ ☐ Private security
- ☐ ☐ Scaffolding/temporary structures (e.g. stages)
- ☐ ☐ Skydivers/hot air balloons/aerial activities
- ☐ ☐ Shuttle buses/mass transportation
- ☐ ☐ Special lighting
- ☐ ☐ Street closures (attach detail description and maps)
- ☐ ☐ Tents/canopies (attach details listing quantities and sizes)
- ☐ ☐ Use of venue dumpsters/trash receptacles
- ☐ ☐ Other _____
- ☐ ☐ Other _____
- ☐ ☐ Other _____

IF APPLICABLE, PLEASE CHECK AND ATTACH THE FOLLOWING DOCUMENTS:

1. ☐ Copy of Montgomery County Alcohol and Beverage License
2. ☐ Copy of Montgomery County Department of Health and Human Services, Food Services License
3. ☐ State permit for fireworks/pyrotechnics
4. ☐ Design plan for live entertainment, concert or amplified music, detailing: stage locations and dimensions, speaker position, sound checks and performance schedules
5. ☐ Map of affected public roadways and intersections
6. ☐ Description of use of shuttle buses/mass transportation

SPECIAL EVENT DESIGN STANDARDS

1. **Event shall meet all City, County, State, and Federal ADA requirements.**
2. **Handicapped accessible parking spaces shall not be blocked from public use.**
3. **Amplified sound shall be minimized through speaker orientation and proper design to maximize distance between residential uses and the active patrons of the event; additionally.**
4. **Event parking shall not interfere with off site traffic circulation.**
5. **Use of live animals shall meet all City, County, Maryland Department of Agriculture, and USDA requirements.**
6. **Event signage shall not be placed in public right-of-ways.**

Applicant declares all information submitted on this application is true and accurate. Applicant will immediately notify the Office of Neighborhood Services of any additions or changes arise after application is submitted. Changes could result in denial or revocation of permit. On behalf of the above organization(s) and all members thereof, applicant agrees to abide by all policies, procedures and instructions set forth or provided by the City of Gaithersburg, its staff, officers and designated agents; and will also comply with all relevant local, state and federal regulations.

Applicant's Signature _____

Date _____

Please return completed Special Event Application form and any additional attachments and information to:
City of Gaithersburg, Office of Neighborhood Services
31 South Summit Avenue, Gaithersburg, Maryland 20877